

# Letters

## Scientifically trained allergists

*To the editor:* Dr. Sim is correct in his assertion that we do not have a scientific understanding of the mechanisms by which commonly encountered synthetic materials produce a variety of symptoms (*Can Med Assoc J* 1982; 126: 225). However, his dismissal of this hypothesis is, in spite of his posture of scientific integrity, distinctly unscientific.

From a scientific standpoint we have the hypothesis that exposure to low-molecular-weight hydrocarbons triggers illness in susceptible individuals. There is a large body of anecdotal data supporting this hypothesis, including the book "Sunnyhill: the Health Story of the 80's",<sup>1</sup> cited by Dr. Sim, and some double-blind scientific studies. Dr. Sim assumes that there are no definitive scientific studies to sustain or deny the hypothesis and then infers that the hypothesis is incorrect. The only valid scientific inference in the absence of definitive studies is that more work needs to be done.

Dr. Sim states that Mr. Small's symptoms of hay fever, heat rash, sleepiness, irritability and loss of energy abated not because he reduced his exposure to specific hydrocarbon inhalants but because he left a stressful job to go into business for himself. Can Dr. Sim produce scientific support for his hypothesis that job stress caused Mr. Small's symptoms? How can Dr. Sim offer a sweeping opinion with such confidence on a patient he has presumably never met or examined? Does he know enough about Mr. Small's history to assert that in these perilous financial times Mr. Small experienced less job stress in beginning a small business than while working for someone else?

Denizens of modern society daily inhale or ingest measurable quantities of formaldehyde, methane, vinyl chloride, organophosphate pesticides, food preservative and colouring agents, benzpyrene, carbon monoxide and nitrous oxides. The hypothesis that this subtoxic exposure accounts for a host of common

complaints usually attributed to the "stress of modern life" by medical practitioners at a loss for a diagnosis is an important one that deserves scientific scrutiny by open-minded investigators, not persons who have obviously prejudged the issue.

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*CMAJ tries to publish as wide a selection of letters to the editor as possible. We can accept more letters and publish them more promptly if they are short and convenient to edit. We ask that letters be no longer than two typescript pages (450 words) and be typed double-spaced with wide margins, like a manuscript.*

*[We showed this letter to Dr. Sim, whose reply follows.—Ed.]*

*To the editor:* Contrary to Dr. Meggs's claim I have long accepted the hypothesis that exposure to chemicals may trigger illness in susceptible individuals, and as an allergist I have often seen this kind of problem. However, before making such a diagnosis it is essential to rule out other possibilities and establish a cause-and-effect relation even though the underlying mechanism cannot always be determined.

In the book "Sunnyhill: the Health Story of the 80's"<sup>1</sup> Mr. Small related that his disorder was diagnosed as an "ecologic illness" due to exposure to various chemicals, such as exhaust fumes, oil fumes, foam rubber and synthetic rugs, on the basis of subcutaneous provocative and neutralization testing. But several controlled clinical studies have shown such methods of diagnosis and treatment to be ineffective.<sup>2</sup>

A critical review of this book shows there are other more plausible explanations for Mr. Small's symptoms and his subsequent improvement. His summer hay fever symptoms were likely caused

by pollens; he responded to therapy with a newly prescribed allergen extract, which was likely more potent and effective than what he had received before. This improvement occurred while he was still living in Toronto, before his escape from urban pollution. His heat rash was likely due to synthetic clothing, which retains heat and often irritates the skin. It is more likely that avoiding synthetic clothing rather than avoiding city pollution prevented the recurrence of his rash. He had difficulty falling asleep at night, likely because of the stress to meet deadlines and his dislike of doing scientific or analytic work. He was then sleepy in the daytime, especially after big lunches. To keep himself awake he drank a lot of tea, which could have contributed to his irritability. Although running one's own business is by no means easy, Mr. Small was good at dealing with social and environmental problems in his new business and was pleased to be able to work at his own pace. With his success he was able to sleep well, did not feel drowsy in the day and did not need to drink a lot of tea. It is more likely that this change in his lifestyle, rather than the move to the country, helped.

There is definitely a need for scientifically trained allergists not only to carry out research but also to properly manage patients with allergy or allergy-related problems.

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## References

1. SMALL B, SMALL B: *Sunnyhill: the Health Story of the 80's*, Small and Associates, Goodwood, Ont, 1980
2. American Academy of Allergy: Position statements — controversial techniques. *Allergy Clin Immunol* 1981; 67: 333-338

## Breast cancer in pregnant women

*To the editor:* Since March 1980 I have treated 13 women between the ages of